

Rural health held back by national policy misalignment

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‘Rural and remote communities are being let down by systems that are not always designed with their needs in mind,’ said Mr Tony Farley, Australian Healthcare and Hospitals Association Limited (AHHA Ltd) Interim Chief Executive Officer.

Despite longstanding efforts to improve health outcomes in rural and remote areas, current health, aged care and disability policies remain poorly aligned, resulting in overly burdensome administration and hindered collaboration between services, which ultimately reduces access to care for communities.

‘We have the policy levers and evidence to do better, but there is a real need to shift from siloed approaches to ones that are coordinated, flexible and locally driven.’

A new Policy Perspectives Brief from the AHHA’s, Deeble Institute for Health Policy Research, [Policy alignment for place-based solutions for better health outcomes in rural and remote communities](#), provides solutions to address the fragmented funding and policy settings that are challenging the delivery of equitable health care in rural and remote Australia.

‘It is not uncommon for a single service to draw on upwards of 50 different funding arrangements across multiple sectors and funders in order to deliver a coherent service that attracts the necessary workforce to meet community needs’, said Mr Farley

‘This complexity creates real challenges for delivering high-quality, integrated services in rural and remote areas. Local organisations are working hard to meet community needs but often find themselves navigating layers of administrative requirements that take time and resources away from direct care.’

The Brief calls for greater transparency in the reporting of funding flows to empower local decision-making and improve accountability and identifies several practical opportunities to address these issues, including:

- aligning federal and state policy and funding to better support place-based solutions,
- developing a shared commissioning and evaluation framework to enable integrated care, and
- establishing nationally coordinated workforce development approaches that reflect the unique needs of rural and remote communities.

Emerging innovations such as Western Queensland’s outcome-focused, collaborative approach to commissioning, are an example of how local leadership, when supported by aligned policy and funding, can drive meaningful change.

‘Communities know what works. What they need are systems that support, rather than hold back, their ability to respond,’ Mr Farley said.

‘What we need now is a whole-of-government commitment to align purpose and reduce unnecessary administration in how we invest in locally-led solutions.’

The Australian Healthcare and Hospitals Association Limited (AHHA Ltd) is the independent peak membership body and advocate for the Australian healthcare system and a national voice for universally accessible, high-quality healthcare in Australia.

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